

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY OFFICE OF WASTE MANAGEMENT AND RADIOLOGICAL PROTECTION

ELECTRONIC DEVICE RECYCLER REGISTRATION FORM

Registration is required under authority of Section 17317 of Part 173, Electronics, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

FOR ADDITIONAL INFORMATION, CONTACT THE

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY,

OFFICE OF WASTE MANAGEMENT AND RADIOLOGICAL PROTECTION,

SUSTAINABLE MATERIALS MANAGEMENT UNIT AT 517-284-6590

YEAR 2014-15 FOR DEC	Q USE ONLY
wds: 3	39/262
Date Received by DEQ:	11-21-2014
Received by: MUO	
Fee: \$ 0,0	000 Yes ☑ No □
ACH Payment:	Yes 🗌 No 🗌
Confirmation #	

NOTE: PLEASE COMPLETE THE ENTIRE APPLICATION EVEN IF THE ANSWER IS "N/A" OR "0"

ELECTRONIC DEVICE RECYCLER		
Company Name (True Name and All Assumed Names): Great Lakes Paperstock Corporation, DBA GLR Advanced 2. Area Code and Te 586-779-1310		2. Area Code and Telephone Number: 586-779-1310
Michigan Corporate ID Number (required):	9676	
3. Mailing Address:		
Address: 30835 Groesbeck Hwy	City: Roseville	
State: MI ZIP: 4806	66	
Country: USA County (if	f in Michigan): Macomb	
4. Home Web Site Address: www.go-glr.com	5a. Contact name:	Doug Verkeyn
	5b. Contact e-mail	address: doug.verkeyn@go-glr.com
	5c. Contact telepho	one number: 248-547-2700
RECYCLING FACILITIES		
6. Please submit the name, address, telephone number covered electronic devices. (324.17317(2)(a)) (Attack		es under your direct control that receive
(a) Company Name: GLR of Roseville	(b) Area Code and Te	elephone Number: 586-779-1310
(c) Mailing Address:	(d) Physical Address:	
Address: 30700 Groesbeck Hwy	Address: 30835 Groesbeck Hw	vy
City: Roseville	City: Roseville	
State: MI	State: MI	
ZIP: 48066	ZIP: 48066	

Fc 33000 45605 9123

(e) Company Name: GLR of Oak Park	(f) Area Code and Telephone Number: 248-547-2700
(g) Mailing Address:	(h) Physical Address:
Address:	Address:
12600 Stark Road	12600 Stark Road
City:	City:
Livonia	Livonia
State:	State:
MI	MI
ZIP:	ZIP:
48150	48150

RECYCLING REPORT (include this information beginning with the October 30, 2010, registration)
7a. The weight of the covered electronic devices (CED) collected for recycling during the previous Program year (October 1 through September 30) as applicable:
Video Display Devices 421 tons + Computers 568 tons = Total 989 tons
7b. The weight of CEDs processed on site
Video Display Devices <u>0</u> tons + Computers <u>568</u> tons = Total <u>568</u> tons
7c. The weight of CEDs shipped off-site for processing/recycling
Video Display Devices 421 tons + Computers 0 tons = Total 421 tons
7d. Location(s) of off-site processing: Material Processing Corp (display devices)
8. Total weight of the CEDs related material collected that was not recycled but was incinerated or landfilled 14 tons.
I, the undersigned registrant, swear and affirm, UNDER PENALTY OF LAW, that the statements contained herein are true and correct. I certify under penalty of law that the information contained on this form, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.
By signing this registration form I certify that my recycling business substantially meets the requirements of Section 17315 of Part 173 that states, in part, "Covered electronic devices collected under this part shall be recycled in a manner that complies with federal and state laws, including rules promulgated by the department, and local ordinances."
PRINT NAME: 15WIVER DATE: 1/-//-/ SIGNATURE: TITLE: 100
SIGNATURE: TITLE:



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YEAR 2014-15 FOR DEQ U	SE O	NLY
Date Received by DEQ:		
Received by:		
Fee:	Yes	☐ No ☐
ACH Payment:	Yes	☐ No ☐
Confirmation #		

NOTE: PLEASE COMPLETE THE ENTIRE APPLICATION EVEN IF THE ANSWER IS "N/A" OR "0"

ELECTRONIC DEVICE RECYCLER			
Company Name (True Name and All Assumed Names): 2. Area Code and Telephone Num		2. Area Code and Telephone Number:	
1. Michigan Corporate ID Number (required	i):		
3. Mailing Address:			
Address:	City:		
State:	ZIP:		
Country:	County (if in Michigan):		
4. Home Web Site Address:		5a. Contact name:	
		5b. Contact e-mail ac	ddress:
		5c. Contact telephone	e number:
RECYCLING FACILITIES			
6. Please submit the name, address, teleph covered electronic devices. (324.17317(2)			under your direct control that receive
(a) Company Name: GLR of Livonia		(b) Area Code and Tele	phone Number: 734-266-2700
(c) Mailing Address:		(d) Physical Address:	
Address: 12600 Stark Road		Address: 12600 Stark Road	
City: Livonia		City: Livonia	
State: MI		State: MI	
ZIP: 48150		ZIP: 48150	

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(e) Company Name: GLR of Flint	(f) Area Code and Telephone Number: 810-238-2836
(g) Mailing Address:	(h) Physical Address:
Address:	Address:
2051 West Bristol Road	2051 West Bristol Road
City:	City:
Flint	Flint
State:	State:
MI	MI
ZIP:	ZIP:
48507	48507

RECYCLING REPORT (include this information beginning with the October 30, 2010, registration)
7a. The weight of the covered electronic devices (CED) collected for recycling during the previous Program year (October 1 through September 30) as applicable:
Video Display Devices tons + Computers tons = Total tons
7b. The weight of CEDs processed on site
Video Display Devices tons + Computers tons = Total tons
7c. The weight of CEDs shipped off-site for processing/recycling
Video Display Devices tons + Computers tons = Total tons
7d. Location(s) of off-site processing:
8. Total weight of the CEDs related material collected that was not recycled but was incinerated or landfilled tons.
I, the undersigned registrant, swear and affirm, UNDER PENALTY OF LAW, that the statements contained herein are true and correct. I certify under penalty of law that the information contained on this form, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.
By signing this registration form I certify that my recycling business substantially meets the requirements of Section 17315 of Part 173 that states, in part, "Covered electronic devices collected under this part shall be recycled in a manner that complies with federal and state laws, including rules promulgated by the department, and local ordinances."
PRINT NAME: DEFF WIEWIURA SIGNATURE: TITLE: